Complete Summary

TITLE

Management of initial abnormal Pap smear: percentage of women diagnosed with an initial abnormal Pap smear who receive at least one clinical follow-up within six months of abnormality identified.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2003 Apr. 47 p. [69 references]

Brief Abstract

DESCRIPTION

This measure assesses percentage of women diagnosed with an initial abnormal Pap smear who receive at least one clinical follow-up within six months of abnormality identified.

RATIONALE

The priority aim addressed by this measure is that all women who undergo cervical cytologic analysis and receive an abnormal Pap result will receive appropriate clinical follow-up.

PRIMARY CLINICAL COMPONENT

Cervical cytology; Abnormal Papanicolaou smear; clinical follow-up

DENOMINATOR DESCRIPTION

Number of women with an initial abnormal Pap smear identified through laboratory reporting

NUMERATOR DESCRIPTION

Number of women identified in the denominator who have a follow-up encounter within six months of initial abnormal Pap results (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Process

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- Management of initial abnormal Pap smear.

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Number of women with an initial abnormal Pap smear identified through laboratory reporting

Identify women with abnormal Pap smear results through laboratory reporting. If measuring quarterly, select a three-month target period that is 6-9 months prior. For example, if this measure is to be collected in June, select a target period of October through December of the previous year.

The suggested time frame for data collection is quarterly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR (INDEX) EVENT

Diagnostic Evaluation

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions
Number of women with an initial abnormal Pap smear identified through laboratory reporting

Exclusions
Unspecified

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions
The number of women identified in the denominator who have an encounter with a Current Procedure Terminology (CPT) code of 88156, 88141, 57454, 57452, 57460, 56351, 58100, or 57511 within six months of initial abnormal Pap results

Review the visit data for the women identified in the target period for clinical follow-up using the CPT codes listed. Many medical groups will have access for this data through administrative data systems.

For those women who have not received a follow-up visit, a chart audit can be performed to determine if care was received by an outside provider. Documentation of follow-up in the chart will be considered meeting the criteria of the measure.

Exclusions
The chart audit may, on rare occasion, determine that the physician's recommendation did not include a follow-up within this time period and that the patient should not be included in this measure.

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative and medical records data
Laboratory data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percentage of women diagnosed with an initial abnormal Pap smear who receive at least one clinical follow-up within six months of abnormality identified.

MEASURE COLLECTION

Management of Initial Abnormal Pap Smear Measures

DEVELOPER

Institute for Clinical Systems Improvement

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Apr

MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures Clearinghouse is working to update this summary.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2003 Apr. 47 p. [69 references]

MEASURE AVAILABILITY

The individual measure, "Percentage of women diagnosed with an initial abnormal Pap smear who receive at least one clinical follow-up within six months of abnormality identified," is published in "Health Care Guideline: Management of Initial Abnormal Pap Smear." An update of this document is available from the Institute for Clinical Systems Improvement (ICSI) Web site.

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

This NQMC summary was completed by ECRI on February 9, 2004.

COPYRIGHT STATEMENT

This NQMC summary (abstracted Institute for Clinical Systems Improvement [ICSI] Measure) is based on the original measure, which is subject to the measure developer's copyright restrictions.

The abstracted ICSI Measures contained in this Web site may be downloaded by any individual or organization. If the abstracted ICSI Measures are downloaded by an individual, the individual may not distribute copies to third parties.

If the abstracted ICSI Measures are downloaded by an organization, copies may be distributed to the organization's employees but may not be distributed outside of the organization without the prior written consent of the Institute for Clinical Systems Improvement, Inc.

All other copyright rights in the abstracted ICSI Measures are reserved by the Institute for Clinical Systems Improvement, Inc. The Institute for Clinical Systems Improvement, Inc. assumes no liability for any adaptations or revisions or modifications made to the abstracts of the ICSI Measures.

Date Modified: 10/25/2004